

**AMENDMENTS TO THE CLAIMS:**

This listing of claims will replace all prior versions, and listings, of claims in the Application.

**LISTING OF CLAIMS:**

1-47. Canceled.

48. (Currently amended) A method for delivering implant material into body tissue using a cannula and plunger assembly, the cannula comprising a cannula body having a first longitudinal opening and a second transverse opening proximal to the first longitudinal opening, the plunger slidably disposed within a lumen of the cannula body and having an attached pliable sealing member disposed at a distal end, the pliable sealing member having, in an uncompressed state, a diameter that is larger than the diameter of the lumen of the cannula body, the method comprising:

inserting the cannula body into targeted body tissue;

perfusing implant material out of the first longitudinal opening into the tissue while the pliable sealing member is in a first position relative to the cannula body and distal to the first longitudinal opening and distal with respect to the cannula body;

moving the pliable sealing member from the first position to a second position relative to the cannula body, the second position being located within the cannula body and proximal with respect to the first longitudinal opening and distal with respect to the second transverse opening; and

perfusing implant material out of the second transverse opening into the tissue while

the pliable sealing member is in the second position, wherein implant material is substantially prevented from exiting the cannula body via the first longitudinal opening.

49. (Previously presented) The method of claim 50, wherein separating the distal portion from the proximal portion of the cannula comprises severing the distal portion from the proximal portion via a notch disposed in the cannula body.

50. (Previously presented) The method of claim 48, further comprising separating a distal portion from a proximal portion of the cannula body after the implant material is perfused out of the respective first longitudinal and second transverse openings.

51. (Previously presented) The method of claim 48, wherein the implant material is longitudinally perfused out of the cannula body through the first longitudinal opening, and transversely perfused out of the cannula body through the second transverse opening.

52. (Previously presented) The method of claim 48, wherein the cannula body further comprises a third transverse opening proximal to the second transverse opening, the method further comprising:

moving the pliable sealing member from the second position to a third position relative to the cannula body, the third position being located within the cannula body and proximal with respect to the second transverse opening and distal with respect to the third transverse opening; and

perfusing implant material out of the third transverse opening into the tissue while the pliable sealing member is in the third position.

53. (Previously presented) The method of claim 48, wherein the implant material is bone cement.

54. (Previously presented) The method of claim 48, wherein the tissue is bone tissue.

55. (Previously presented) The method of claim 54, wherein the bone tissue is a vertebral body.

56. (Currently Amended) A method for delivering implant material into body tissue using a cannula, the cannula comprising a cannula body having a proximal end, a distal end, and a lumen extending there between and terminating at longitudinal opening at the distal end, and the cannula body further comprising one or more transverse openings, a plunger slidably disposed within the lumen and comprising an attached pliable sealing member having a diameter, in an uncompressed state, that is larger than the diameter of the lumen, the method comprising:

inserting the cannula body into body tissue, the cannula body including a plurality of notches disposed in the wall of the cannula body;

advancing the plunger within the lumen so as to place the pliable sealing member distally with respect to the longitudinal opening;

perfusing the implant material out of the ~~one or more openings~~ longitudinal opening into the tissue; and

retracting the plunger within the lumen so as to place the pliable sealing member proximally with respect to the longitudinal opening;

perfusing the implant material out of the one or more transverse openings into the tissue; and

separating the proximal end from the distal end of the cannula body at one of the plurality of notches.

57. (Previously presented) The method of claim 56, wherein the implant material is bone cement.

58. (Previously presented) The method of claim 56, wherein the tissue is bone tissue.

59. (Previously presented) The method of claim 58, wherein the bone tissue is a vertebral body.

60. (Currently Amended) The method of claim 56, wherein the one or more openings comprises a plurality of openings axially spaced from each other along the cannula body ~~the method further comprising perfusing the implant material out of the plurality of openings into the tissue.~~

61-63. (Canceled)

64. (Previously presented) The method of claim 56, further comprising implanting the distal end of the cannula body within the tissue.

65. (Previously presented) The method of claim 56, wherein the distal end of the cannula body is composed of a biocompatible material

66. (Currently amended) A method for delivering implant material into body tissue using a cannula and plunger assembly, the cannula comprising a cannula body having a distal end opening and a wall opening proximal to the distal end opening, the plunger slidably disposed within a lumen of the cannula body and having an attached pliable sealing member, wherein, in an uncompressed state, the pliable sealing member has a diameter that is larger than the diameter of the lumen of the cannula body, the method comprising:

inserting the cannula body into targeted body tissue;

perfusing implant material out of the distal end opening into the tissue while the pliable sealing member is in a first position relative to the cannula body and distal to the distal end opening;

moving the pliable sealing member from the first position to a second position relative to the cannula body located within the cannula body lumen between the distal end opening and the wall opening; and

perfusing implant material out of the wall opening into the tissue while the pliable

sealing member is in the second position, wherein implant material is substantially prevented from passing the pliable sealing member and exiting the cannula body via the distal end opening.

67. (Previously presented) The method of claim 66, further comprising separating a distal portion from a proximal portion of the cannula body after the implant material is perfused out of the respective distal end and wall openings, the separation effectuated by unscrewing the distal portion from the proximal portion via a threaded junction disposed on the cannula body.

68. (Previously presented) The method of claim 66, further comprising separating a distal portion from a proximal portion of the cannula body at a connective sleeve interposed between the distal portion and the proximal portion, the separation effectuated by applying an external removal force to a connective sleeve.